



2682

TRANSMITTAL  
FORMIn re the Application of  
Charles L. Falkiner, et al.

Application No.: 10/073,384

Filing Date: February 12, 2002

Group Art Unit:

Examiner:

Attorney Docket No.: 0081604

Total Number of Pages Submitted (Including Transmittal Form): 3

For: PERSONAL ALERT AND RESCUE SYSTEM (PARS)

RECEIVED

Assistant Commissioner for Patents  
Washington, D.C. 20231

DEC 12 2002

Technology Center 2600

Sir:

Transmitted herewith please find the following enclosures:

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached		
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Request for Approval of Drawing Corrections	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Preliminary	<input type="checkbox"/> Drawing Figure(s) ; Sheets	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Propriety Information
<input type="checkbox"/> Affidavits / Declaration(s)	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input checked="" type="checkbox"/> Additional Enclosure(s) as Listed Below:
<input type="checkbox"/> Express Abandonment Request	<input checked="" type="checkbox"/> Power of Attorney/Revocation	Return Receipt Postcard
<input type="checkbox"/> Information Disclosure Statement	<input checked="" type="checkbox"/> Change of Correspondence Address	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Response to Missing Parts / Incomplete Application	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53		

Additional Remarks:

DEPOSIT ACCOUNT USE  
AUTHORIZATION  
Please grant any extension  
necessary for entry;  
Charge any fee due to our  
Deposit Account No. 11-0220

Respectfully submitted,

Peter A. Shaddock II  
Registration No. 44,331

## CERTIFICATE OF MAILING

I hereby certify that this correspondence (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date indicated below with sufficient postage as first class mail in an envelope addresses to: Assistant Commissioner for Patents, Washington, D.C. 20231.

Typed or printed name of  
person signing Certificate

Kelly A. Brown

Signature

Date: December 5, 2002